Image# 14940180905 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Robert W. Goodlatte									
	(b) Address (number and street) 5341 Fox Ridge Rd	☐ Check if address changed				2. Candidate's FEC Identification Number H2VA06115				
	(c) City, State, and ZIP Code					3. Is This Ne		~/	Amended	
	Roanoke	VA 24018-8755				Statement (N) OR	×	(A)	
4.	Party Affiliation	5. Office Soug	ht			rict of Candidate				
	REPUBLICAN PARTY	House			VA	06				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full) BOB GOODLATTE FOR CONGRESS COMMITTEE									
	(b) Address (number and street) P.O. Box 292									
	(c) City, State, and ZIP Code									
	Roanoke				VA	24002				
(Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.										
NOTE: This designation should be filed with the principal campaign committee.										
(a) Name of Committee (in full) Goodlatte Victory Committee										
	(b) Address (number and street) 228 S Washington Street									
_	#115 (c) City, State, and ZIP Code									
	Alexandria				VA	22314-5404				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Signature of Candidate Date								-		
	obert W. Goodlatte			[El	ectronically Filed]	01/30/2014				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
		1		1			ı			

FEC FORM 2 (REV. 02/2009)